UNITED STATES BANKRUPTCY COURT Northern District of Georgia

IN RE: * CASE NO. 18-51776-PMB

*

Kawika Trevice Worrell * CHAPTER 13

Camille Lizette Worrell

*

Debtor.s *

COVER SHEET FOR AMENDED SCHEDULES I AND J

Schedule I was amended to reflect current income.

Schedule J was amended to reflect current expenses.

Also included with this amendment are the Amended Summary of Schedules, Amended Statistical Summary and Declaration of Schedules.

Date: July 11, 2018

/s/

Howard Slomka, Esq. Georgia Bar # 652875 Slipakoff & Slomka, P.C. Attorney for Debtor 2859 Paces Ferry Road SE Suite 1700 Atlanta, GA 30339 Tel. (404) 800-4001

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Fill in this informatio	n to identify your case:	
Debtor 1	Kawika Trevice Worrell	
Debtor 2 (Spouse, if filing)	Camille Lizette Worrell	
United States Bankr	ruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number	18-51776	Check if this is:
(II KIOWII)		 An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Form	m 106l	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employinformation.	ment		Debtor 1	Debtor 2 or non-filing spouse
If you have more tha		Employment status	■ Employed	☐ Employed
attach a separate pa information about ad	•	Employment status	☐ Not employed	■ Not employed
employers.		Occupation	Lab Maintenance Tech	
Include part-time, se self-employed work.		Employer's name	Hyatt Corporation	
Occupation may incl or homemaker, if it a		Employer's address	Select Hotels Group LLC 150 North Riverside Plaza Chicago, IL 60606	

Part 2: Give Details About Monthly Income

Calculate gross Income. Add line 2 + line 3.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2,600.00

0.00

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 2,600.00 \$ 0.00

Official Form 1061 Schedule I: Your Income page 1

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	otor 1 otor 2	Kawika Trevice Worrell Camille Lizette Worrell		(Case	e number (if known)	18-5	51776		
	Cor	y line 4 here	4.		Fo \$	2,600.00		r Debtor n-filing s		
_	-	*			Ť-	2,000.00	Ť-			-
5.		all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	295.00	\$_		0.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$ \$	0.00	, b		0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d 5e		\$ \$	0.00	\$_ \$		0.00	-
	5f.	Domestic support obligations	5f.		\$-	0.00	\$-		0.00	_
	5g.	Union dues	59		\$	0.00	\$_		0.00	-
	5h.	Other deductions. Specify:	_).+	\$	0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	295.00	\$		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,305.00	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	* \$		0.00	-
	8d.	Unemployment compensation	80		\$	0.00	\$		0.00	_
	8e.	Social Security	8e	.	\$	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g	J.	\$_ \$_	0.00	\$_ \$_ . \$_		0.00 0.00	-
	8h.	Other monthly income. Specify:	– 8n	1.+	\$ _	0.00	+ <i>p</i> _		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	,	\$	0.00	\$_		0.00	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,305.00 + \$		0.00	= \$	2,305.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe				-		e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain lies						e. 12.	\$	2,305.00
13.	Do :	you expect an increase or decrease within the year after you file this form? No.	?					·	Combin monthl	ned y income
		NO. Vec Evolain								

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
	tor 1 Kawika Trevice Worrell		Chec	k if this is:	
	NAWING TIEVICE WOITER			An amended filing	
	tor 2 Camille Lizette Worrell Duse, if filing)		_	A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF GEOF	RGIA	1	MM / DD / YYYY	
1	e number				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/
info	as complete and accurate as possible. If two married people ar brmation. If more space is needed, attach another sheet to this match the complex in the comp				
	□ No. Go to line 2.				
	■ Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	<i>ld</i> of Debt	or 2	
_	•	To, Coparato Froucono	, u 0, B05.	o	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		12	Yes
		Daughter		40	□ No
		Daughter			■ Yes □ No
					□ No □ Yes
					□ res
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless y penses as of a date after the bankruptcy is filed. If this is a supp plicable date.				
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		535.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
	4d. Homeowner's association or condominium dues		4d. \$		165.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

ebtor 1		revice Worrell	0	wn) 18-51776
ebtor 2	Camille	Lizette Worrell	Case number (if know	wii) 10-31770
Util	ities:			
6a.	Electricity,	heat, natural gas	6a. \$	125.00
6b.	Water, sev	ver, garbage collection	6b. \$	0.00
6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c. \$	100.00
6d.	Other. Spe	ecify:	6d. \$	0.00
Foo	od and house	ekeeping supplies	7. \$	390.00
Chi	Idcare and c	hildren's education costs	8. \$	0.00
Clo	thing, laund	ry, and dry cleaning	9. \$	18.00
). Per	sonal care p	roducts and services	10. \$	15.00
. Med	dical and de	ntal expenses	11. \$	20.00
2. Tra	nsportation.	Include gas, maintenance, bus or train fare.		242.22
	not include ca		12. \$	212.00
		clubs, recreation, newspapers, magazines, and		0.00
		ributions and religious donations	14. \$	0.00
	urance.		4 00	
	not include in Life insura	surance deducted from your pay or included in lines	s 4 or 20. 15a. \$	0.00
	i. Life irisura b. Health ins		15a. \$	0.00
			·	0.00
	. Vehicle ins		15c. \$	210.00
		rance. Specify:	15d. \$	0.00
	(es. Do not in ecify:	clude taxes deducted from your pay or included in li	nes 4 or 20. 16. \$	0.00
•	·	ease payments:	10. ψ	0.00
		ents for Vehicle 1	17a. \$	0.00
		ents for Vehicle 2	17b. \$	0.00
	. Other. Spe		17c. \$	0.00
	l. Other. Spe		17d. \$	0.00
		of alimony, maintenance, and support that you		
		your pay on line 5, Schedule I, Your Income (Offi		0.00
		you make to support others who do not live wi		0.00
	ecify:		19.	
		erty expenses not included in lines 4 or 5 of this	form or on Schedule I: Your Incom	ne.
		on other property	20a. \$	0.00
20b	. Real estat	e taxes	20b. \$	0.00
20c	. Property, I	nomeowner's, or renter's insurance	20c. \$	0.00
20d	l. Maintenar	ce, repair, and upkeep expenses	20d. \$	0.00
20e	e. Homeown	er's association or condominium dues	20e. \$	0.00
. Oth	er: Specify:		21. +\$	0.00
0 0-1				
	a. Add lines 4	monthly expenses	\$	4 700 00
		through 21. 2 (monthly expenses for Debtor 2), if any, from Offic		1,790.00
22c	. Add line 22a	a and 22b. The result is your monthly expenses.	\$	1,790.00
3. Cal	culate vour	monthly net income.		
		12 (your combined monthly income) from Schedule	I. 23a. \$	2,305.00
23b	. Copy your	monthly expenses from line 22c above.	23b\$	1,790.00
	1,7,7		·	.,
23c	. Subtract y	our monthly expenses from your monthly income.		545.00
	The result	is your monthly net income.	23c. \$	515.00
			46	
		an increase or decrease in your expenses within by expect to finish paying for your car loan within the year o		n increase or decrease because of a
		terms of your mortgage?	i do you expect your mortgage payment to	morease or decrease pecause of a
ea		, 5 5		
		Evolain hara:		
Ш,	Yes.	Explain here:		

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Fill in this information to identify your case:						
Debtor 1	Kawika Trevice W	Kawika Trevice Worrell				
	First Name	Middle Name	Last Name			
Debtor 2	Camille Lizette W	orrell				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRIC	OF GEORGIA			
Case number	18-51776					
(if known)						

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pai	t 1: Summarize Your Assets		
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	98,072.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,850.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	113,922.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	92,762.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	147,164.00
	Your total liabilities	\$	239,926.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,305.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,790.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7	■ Yes What kind of debt do you have?		
٠.			
7.	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

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Debtor 1 Kawika Trevice Worrell
Debtor 2 Camille Lizette Worrell

Case number (if known) 18-51776

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,712.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	142,648.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	142,648.00

Fill in this information to identify your case:					
Debtor 1	Kawika Trevice	Kawika Trevice Worrell			
	First Name	Middle Name	Last Name		
Debtor 2 Camille Lizette Worrell					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRIC	T OF GEORGIA		
Case number	18-51776				
(if known)					

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that they are true and correct. X /s/ Kawika Trevice Worrell	x /s/ Camille Lizette Worrell
Kawika Trevice Worrell Signature of Debtor 1	Camille Lizette Worrell Signature of Debtor 2
Date July 11, 2018	Date July 11. 2018

UNITED STATES BANKRUPTCY COURT Northern District of Georgia

IN RE: * CASE NO. 18-51776-PMB

*

Kawika Trevice Worrell * CHAPTER 13

*

and *

Debtor.s *

CERTIFICATE OF SERVICE

This is to certify that I have this day served a copy of the within and foregoing Amended Schedule I, Amended Schedule J, Amended Statistical Summary and Summary of Schedules and Amended Declaration of Debtor's Schedules, in the above styled case by depositing same in the United States mail with the adequate postage affixed thereto to insure delivery addressed as follows:

Melissa J. Davey, Chapter 13 Trustee 260 Peachtree St NE #200 Atlanta, GA 30303

Kawika Trevice Worrell 2555 Flat Shoals Rd #3005 Atlanta GA 30349,

SEE ATTACHED FOR ADDITIONAL CREDITORS

Date: July 11, 2018

/s/

Howard Slomka, Esq. Georgia Bar # 652875 Slipakoff & Slomka, P.C. Attorney for Debtor 2859 Paces Ferry Road SE Suite 1700 Atlanta, GA 30339 Tel. (404) 800-4001 Label Matrix for local noticing Case 18-51776-pmb

Northern District of Georgia Atlanta

Wed Jul 11 15:52:29 EDT 2018

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057-4975

Dept Of Ed/navient Po Box 9635

Wilkes Barre, PA 18773-9635

Enhanced Recovery Co L 8014 Bayberry Rd

Jacksonville, FL 32256-7412

TRS 401 W Peachtree Street NW Atlanta, GA 30308

Loan at last PO Box 1193 Lac Du Flambeau, WI 54538-1193

PRA Receivables Management, LLC PO Box 41021

Norfolk, VA 23541-1021

Premier Bankcard, Llc Jefferson Capital Systems LLC Assignee Po Box 7999 Saint Cloud Mn 56302-7999

Seventh Avenue 1112 7th Ave Monroe, WI 53566-1364

Synchrony Bank c/o PRA Receivables Management, LLC PO Box 41021 Norfolk, VA 23541-1021

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Bloomington, IL 61702-3097

DP Atlanta Post Office Box 855 Decatur, GA 30031-0855

Directv, LLC by American InfoSource LP as agent 4515 N Santa Fe Ave

Oklahoma City OK 73118-7901

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4868

Brian K. Jordan Aldridge Pite, LLP Suite 500 - Fifteen Piedmont Center

3575 Piedmont Road, NE Atlanta, GA 30305-1636

Navient Solutions Inc 11100 Usa Pkwy Fishers, IN 46037-9203

Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4952

Providence Place HOA c/o Sentry Management 303 Corporate Center Drive Suite 300A Stockbridge, GA 30281-6303

Seventh Avenue c/o Creditors Bankruptcy Service P.O. Box 800849 Dallas, TX 75380-0849

U. S. Attorney 600 Richard B. Russell Bldg. 75 Ted Turner Drive, SW Atlanta GA 30303-3315

Melissa J. Davey

P.O. Box 961275

Fort Worth, TX 76161-0275

Melissa J. Davey, Standing Ch 13 Trustee

Suite 200

260 Peachtree Street, NW Atlanta, GA 30303-1236

Directv, LLC

by American InfoSource LP as agent

PO Box 5008

Carol Stream, IL 60197-5008

(p) GEORGIA DEPARTMENT OF REVENUE

COMPLIANCE DIVISION ARCS BANKRUPTCY

1800 CENTURY BLVD NE SUITE 9100

ATLANTA GA 30345-3202

LVNV Funding

c/o Resurgent Capital Services

PO BOX 10675

Greenville, SC 29603-0675

Navient Solutions, LLC. on behalf of Department of Education Loan Services

PO BOX 9635

Wilkes-Barre, PA 18773-9635

(p) PORTFOLIO RECOVERY ASSOCIATES LLC

PO BOX 41067

NORFOLK VA 23541-1067

Joshua M. Ryden Aldridge Pite, LLP Fifteen Piedmont Center 3575 Piedmont Rd NE Suite 500 Atlanta, GA 30305-1636

Howard P. Slomka Slipakoff & Slomka, PC Overlook III - Suite 1700 2859 Paces Ferry Rd, SE Atlanta, GA 30339-6213

Camille Lizette Worrell 2555 Flat Shoals Rd #3005

Atlanta, GA 30349-4334

#3005 Atlanta, GA 30349-4334

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g) (4).

Georgia Department of Revenue 1800 Century Blvd Suite 17200 Atlanta, GA 30345 Portfolio Recovery Associates, LLC POB 41067 Norfolk VA 23541

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d)Chrysler Capital (u Po Box 961275 Fort Worth, TX 76161-0275

(u) DP Atlanta, LLC

End of Label Matrix
Mailable recipients 30
Bypassed recipients 2
Total 32